c772 U.S

## UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No	35 C15270	_
First Na	med Inventor or Application Identifier	
KAZUMASA YOSHIKAV	VA. ET AL	
Express Mail Lahel No		

APPLICATION ELEMENTS						
See MPEP chapter 600 concerning utility patent application contents  ADDRESS	Commissioner for Patents  Box Patent Application Washington, DC 20231					
(Submit an original, and a duplicate for fee processing)	OM or CD-R in duplicate, large table or Computer am (Appendix)					
See 37 CFR 1-27	eotide and/or Amino Acid Sequence Submission					
3. X Specification Total Pages 41 a.	Computer Readable Form (CRF)					
b Sp. b Sp. b Sp. d. X Drawing(s) (35 USC 113) Total Sheets	coecification Sequence Listing on.  CD-ROM or CD-R (2 copies). or					
5 Oath or Declaration Total Pages	paper					
a. Newly executed (original or copy)	Statements verifying identity of above copies CCOMPANYING APPLICATION PARTS					
b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 6 below]  DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).  6 X Application Data Sheet. See 37 CFR 1.76  15 Certif	nment Papers (cover sheet & document(s))  FR 3.73(b) Statement Power of Attorney  sh Translation Document (if applicable) nation Disclosure Copies of IDS minary Amendment  In Receipt Postcard (MPEP 503) ald be specifically itemized)  fied Copy of Priority Document(s) eign priority is claimed)					
17 If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:  Continuation  Divisional  Continuation-in-part (CIP) of prior application No/  Prior application information  Examiner  Group/Art Unit						
For CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from considered a part of the disclosure of the accompanying continuation or divisional application and is hele be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
18 CORRESPONDENCE ADDRESS						
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NAME						
Address						
Country State  Country Telephone	Zip Code Fax					

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	15-20 =	0	X \$ 18 00 =	\$ 000
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	7-3 =	4	X \$ 80.00 =	\$ 320 00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) \$2			\$270.00 =	\$ 0.00
				BASIC FEE (37 CFR 1.16(a))	\$ 710 00
			Total of	above Calculations =	\$ 1030.00
	Reduction by	50% for filing by small er	tity (Note 37 CFR 1.9,	1.27, 1.28).	
				TOTAL =	\$ 1030.00
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
NAME	Christopher Philip Wrist - Reg. No. 32,078		
SIGNATURE	Cluster Con		
DATE	March 30, 2001		

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